PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10 693506

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR SMALL ENTITY		
O. ADAC			20		, Constituted		.	RATE	FEE	٢	RATE	FEE
TOTAL CLAIMS								BASIC FEE		OR	ASIC FEE	770.00
FOR N			NUMBER F	NUMBER FILED		NUMBER EXTRA			000.00			
TOTAL CHARGEABLE CLAIMS 70			70 min	us 20=	•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			ر minus 3 =					X43=		OR	X86=	86
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL		OR	TOTAL	858
CLAIMS AS AMENDED - PART II (Column 2) (Column 3)							<u>.</u>	SMALLE	NTITY	OR	OTHER SMALL	ENTITY
TA	7 1700	CLAIMS REMAINING AFTER		HIGH NUM PREVI	HEST IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	* 7 D	Minus	** 2	POR	= 0	1	X\$ 9=		OR	X\$18=	
IENC	Independent	• 4	Minus	***	4	= 0		X43=		OR	X86=	V
AR	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						L	+145=		OR	+290=	$/ \setminus$
								TOTAL			TOTAL ADDIT. FEE	
								ADDIT. FEE		1	ADDIT. FEE	
		(Column 1)			ımn 2) HEST	(Column 3	<u>'</u>		ADDI-	1		ADDI-
m		CLAIMS REMAINING		NUI	MBER	PRESENT EXTRA	1	RATE	TIONAL		RATE	TIONAL
AMENDMENT B		AFTER AMENDMENT			D FOR	EATTIA	4		FEE	-		FEE
	Total	*	Minus	**		=	_	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		<u> -</u>	4	X43=		OR	X86=	
 	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIR						اــ	+145=		OR	+290=	
								TOTAL		OR	TOTAL ADDIT. FEI	
ADDIT. FEE: ADDIT.												
 _		(Column 1)	·		umn 2) SHEST	(Column :	"		ADDI-	1		ADDI-
ူပ	`	REMAINING AFTER			MBER VIOUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
		AMENDMENT	ļ	PAI	DFOR		-		FEE	1	-	FEE
ĕ	Total		Minus	**		=	4	X\$ 9=		OR	X\$18=	
AMENDMENT C	Independent	*	Minus	***	NT CLAN	1=	4	X43=		OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		ОЯ	+290=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	TOTA	E
	* If the entry in column 1 is less trian the cary in THIS SPACE is less than 20, enter "20." ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											